

Bolsover District Council

Meeting of Audit and Corporate Overview Scrutiny Committee on 26th July 2022

Internal Audit Consortium Annual Report 2021/22

Report of the Head of the Internal Audit Consortium

Classification	This report is Public
Report By	Head of The Internal Audit Consortium
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PURPOSE/SUMMARY OF REPORT

The purpose of this report is to: -

- Present a summary of the internal audit work undertaken during 2021/22 from which the opinion on governance, risk and internal control is derived.
- Provide an opinion on the overall adequacy and effectiveness of the Council's governance, risk and control arrangements including any qualifications to that opinion.
- Draw attention to any issues that need to be considered for inclusion in the Annual Governance Statement.
- Compare work undertaken with that which was planned and summarise performance.
- Comment on compliance with the Public Sector Internal Audit Standards (PSIAS) and Code of Ethics.
- Comment on the results of the internal quality assurance programme.
- Confirm the organisational independence of internal audit
- Review the performance of the Internal Audit Consortium against the current Internal Audit Charter.

REPORT DETAILS

1. Background

1.1 The Public Sector Internal Audit Standards require that the Head of the Internal Audit Consortium delivers an annual internal audit opinion and report that can be used by the organisation to inform its governance statement.

2. <u>Details of Proposal or Information</u>

- 2.1 COVID- 19 along with staff vacancies and the training requirements of new staff has impacted on the extent of completion of the 2021/22 internal audit plan. However, enough of the internal audit plan (along with reliance on other assurances) has been completed to be able to give an unlimited audit opinion in respect of the 2021/22 financial year.
- 2.2 Appendix 1 details the audit reports issued in respect of audits included in the 2021/22 internal audit plan. The appendix shows for each report the overall assurance level provided on the reliability of the internal controls and the assurance level given at the last audit. The report opinions can be summarised as follows:

Assurance Level	2020/21 Number	2021/22 %	2021/22 Number	2021/22 %
Substantial	17	74	17	71
Reasonable	6	26	4	19
Limited	0	0	0	0
Inadequate	0	0	0	0
Total	23	100	21	100

- 2.3 A definition of the above assurance levels is shown at the bottom of Appendix 1.
- 2.4 No fraud was identified.
- 2.5 The following table summarises the performance indicators for the Internal Audit Consortium as detailed in the Internal Audit Service Plan:

Description	2021/22		2022/23
	Plan	Actual	Plan
Cost per Audit Day	£306	£288	£310
Percentage of Plan Completed (BDC)	75%	71%	75%
Sickness Absence (Average Days	8.0	1.2	8.0
per Employee)	(Corporate Trigger)		
Customer Satisfaction Score (BDC)	85%	95%	85%
To issue internal audit reports within	90%	100%	90%
10 days of the close out meeting			
Quarterly reporting to Audit and Corporate Overview Scrutiny	100%	100%	100%
Committee			

OPINION ON THE ADEQUACY AND EFFECTIVENESS OF GOVERNANCE, RISK AND CONTROL ARRANGEMENTS

- 2.6 The Head of the Internal Audit Consortium is responsible for the delivery of an annual audit opinion that can be used by the council to inform its governance system. The annual opinion concludes on the overall adequacy and effectiveness of the organisation's framework of governance, risk management and control.
- 2.7 In my opinion reasonable assurance can be provided on the overall adequacy and effectiveness of the council's framework for governance, risk management and control for the year ended 2021/22. Due to the ongoing impact of COVID-19 in 2021/22, less internal audit work has been completed than usual. Audits have been undertaken in critical areas or high risk areas to ensure the Council's governance remains robust. In my opinion, sufficient work has been completed and assurances ascertained to be able to provide an unlimited opinion on the systems of governance, risk management and control in place. '
- 2.8 Assurance can never be absolute. In this context "reasonable assurance" means that arrangements are in place to manage key risks and to meet good governance principles, but there are some areas where improvements are required.
- 2.9 As well as internal audit work assurance has also been gained from previous years' work, the work of the risk management group, PSN compliance, external audit and compliance with the Code of Corporate Governance.
- 2.10 Overall, 100% of the areas audited received Substantial or Reasonable Assurance demonstrating that there are effective systems of governance, risk management and control in place.
- 2.11 The Audit and Corporate Overview Scrutiny Committee receive a 6-monthly report in relation to outstanding audit recommendations. Where a limited or inadequate assurance audit report is issued or where the Committee has concerns, managers are required to attend the Committee to discuss progress and to provide assurance that recommendations are being implemented in a timely fashion.

ISSUES FOR INCLUSION IN THE ANNUAL GOVERNANCE STATEMENT

2.12 The internal control issues arising from audits completed in the year and outstanding internal audit recommendations have been considered during the preparation of the Annual Governance Statement. There are no issues arising from internal audit work that require raising in the Annual Governance Statement.

COMPARISON OF PLANNED WORK TO ACTUAL WORK UNDERTAKEN

2.13 The Internal Audit Plan for 2021/22 was approved by the Audit and Corporate Overview Scrutiny Committee on the 27th of April 2021. The majority of audits have been completed with the remaining audits being scheduled into the 2022/23 Internal Audit Plan. Appendix 2 details the audits completed and those deferred.

COMPLIANCE WITH THE PUBLIC SECTOR INTERNAL AUDIT STANDARDS / CODE OF ETHICS AND OTHER QUALITY ASSURANCE RESULTS

2.14 Quality control procedures have been established within the Internal Audit Consortium and these are documented in the Quality and Assurance Improvement Programme at Appendix 3. These procedures are designed to ensure compliance with the PSIAS and Code of Ethics.

ORGANISATIONAL INDEPENDENCE

2.15 It can be confirmed that the internal audit activity is organisationally independent. Internal audit reports directly to the Assistant Director Treasurer and Section 151 Officer but has a direct and unrestricted access to the Senior Leadership Team and the Audit and Corporate Governance Overview Scrutiny Committee.

REVIEW OF PERFORMANCE OF THE INTERNAL AUDIT CONSORTIUM AGAINST THE CURRENT INTERNAL AUDIT CHARTER

- 2.16 The Internal Audit Charter was last reported to and approved by the Audit and Corporate Overview Scrutiny Committee in September 2021.
- 2.17 Based on the information provided in this report on the completion of the 2021/22 internal audit plan, it is considered that the requirements of the Charter were met during the year.

3. Reasons for Recommendation

- 3.1 To present to Members the annual report for the Internal Audit Consortium in respect of Bolsover District Council for 2021/22.
- 3.2 To ensure compliance with the Public Sector Internal Audit Standards.
- 3.3 To provide an annual opinion on the overall adequacy and effectiveness of the Council's governance, risk and control arrangements including any qualifications to that opinion.

4 Alternative Options and Reasons for Rejection

4.1 Not Applicable.

RECOMMENDATION(S)

1. That the Internal Audit Consortium Annual Report for 2021/22 be accepted.

<u>IMPLICATIONS;</u>			
Finance and Risk: Yes⊠ Details:	No □		
Internal audit reviews help to ensure the effectively thereby contributing to ensur audit reviews help to ensure that risk is recommendations to reduce the level of	ring that value managed app	for money is obtain ropriately. Internal a	ed. Regular audit makes
	On b	ehalf of the Section	151 Officer
Legal (including Data Protection): Details:	Yes⊠	No □	
The core work of internal audit is derived Accounts and Audit Regulations 2015 weffective internal audit to evaluate the eand governance processes, taking in to standards or guidance".	vhich requires ffectiveness o	the Council to "und f its risk manageme	ertake an nt, control
	On beh	alf of the Solicitor to	the Council
<u>Staffing</u> : Yes□ No ⊠ Details:			
	On be	half of the Head of F	Paid Service
DECISION INFORMATION			
le the decision of Very Berlinian			NI-
Is the decision a Key Decision? A Key Decision is an executive decisio	n which has a	significant impact	No

Is the decision a Key Decision? A Key Decision is an executive decision which has a significant impact on two or more District wards or which results in income or expenditure to the Council above the following thresholds: Revenue - £75,000 □ Capital - £150,000 □ ☑ Please indicate which threshold applies	No
In the decision publicat to Call In 2	No
Is the decision subject to Call-In? (Only Key Decisions are subject to Call-In)	No
(Unly Key Decisions are subject to Call-In)	

District Wards Significantly Affected	(please state which wards or state All if all wards are affected)
Consultation: Leader / Deputy Leader □ Executive □ SLT □ Relevant Service Manager ☒ Members □ Public □ Other □	Details:

Links to Council	Ambition: Customers	. Economy a	nd Environment.

Audit reviews help to ensure that the council's resources and priorities are focused on achieving the objectives within the Council Ambition and that there are appropriate governance, risk and control arrangements in place.

DOCUMENT INFORMATION		
Appendix No	Title	
1	Internal Audit Reports Issued 2021/22	
2	Comparison of planned work to work completed 2021/22	
3	Quality and Assurance Improvement Programme	

Background Papers

(These are unpublished works which have been relied on to a material extent when preparing the report. They must be listed in the section below. If the report is going to Executive you must provide copies of the background papers).